PTOISB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Tradezark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMS control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 091 751999 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN **OR** SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA RATE FEE RATE FOR FÉE BASIC FEE OR (37 CFR 1.16(a)) TOTAL CLAIMS OR X S minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = X S OR X S (37 CFR 1.16(b)) : -MULTIPLE DEPENDENT CLAIM PRESENT OR (37 CFR 1.16(4)) OR TOTAL TOTAL \* If the difference in column 1 is less than zero, enter "O" in column 2. **CLAIMS AS AMENDED - PART II** OTHER THAN OR 10-18-0 (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS **HIGHES** ⋖ PRESENT RATE ADDI-RATE ADD1 REMAINING MUMBER TIONAL AFTER EXTRA TIONAL **PREVIOUSLY** FEE FEE/ AMENDMENT PAID FOR Total profit Lvejop Minus ENDM 8 OR Minus COT CER L. MOD X \$ = X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST CFR 1.16(4)) OR TOTAL OR ADOIL FEE ADD'S FEE 2-14.05 (Column 1) (Cotumn 2) (Column 3) CI AILES HIGHEST ADDI-TIONAL  $\mathbf{\omega}$ REMAINING PRESENT RATE RATE ADD1-NUMBER EXTRA TIONAL ENT **AFTER** PREVIOUSLY AMENDMENT REE FEE PAID FOR Minus Total ENDM (DF CFR L16(d) X S = OR Minus Independent (37 CFR L1488) • X S X S OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)) OR + 4 TOTAL TOTA ADO'L FEE OR ADD'L FEE (Column 1) (Cotumn 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE ADOL-RATE TIONAL FXTRA TIONAL ENT AFTER **PREVIOUSLY** FEE AMENDMENT PAID FOR ÆE Minus ş Y. X S OF OFR LIGHT X S OR. Minus 品 X S • OR X S PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM. (87 CFR 1.1668) OR TOTAL TOTAL ADO'L FEE OR ADD'L FEE . If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

...

\*\*\* If the "Highest Number Previously Peid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Peid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application from the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form another suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.